DEVELOPMENTAL SERVICES RIDER E

Applicability
The Office of Adults with Cognitive and Physical Disability Services, Developmental Services has the responsibility to assure that Providers receiving contract funds adhere to specific requirements listed below.

Compliance with Consent Decrees
The "Community Consent Decree" is the federal civil action officially captioned Consumer Advisory Board v. DHHS Commissioner, No. 91-321-P-C (D. Ct. Me.) and is incorporated herein by reference. Insofar as the Provider serves members of the class, all terms and conditions of the Community Consent Decree are applicable to this Agreement. All Providers must pay particular attention to the Grievance process available to persons with developmental disabilities served by the Provider, and ensure that notice of the process is regularly provided to persons served by the Provider. Providing notice includes, at a minimum, ensuring that written notice of the grievance process is provided to the person and/or their guardian at any planning meeting; posting notice of the grievance process in an appropriate common area of all facilities operated by the Provider; and posting notice of the grievance process on any website maintained by the Provider. In addition, the Provider must ensure that all new staff are trained in the grievance process and that it is available to all persons served by the Department.

Service Planning
The Provider shall comply with all requirements of the Department relative to the Person Centered Planning process. Specifically, the Provider shall:

1. Participate in the planning process in the capacity that is negotiated as part of this Agreement, including provision of PCP Coordinator services as determined by the Department’s protocol for designating PCP responsibility.
2. Participate in planning efforts in a way that identifies and records individuals' needs and wishes;
3. Adhere to specific timelines for completion and submission of written plans to the Department on forms approved by the Department; and
4. Ensure that staff who facilitate planning meetings have the necessary training and support to comply with Department policy, protocols and practices.
5. Ensure that meetings are scheduled and held in accordance with a schedule that allows for uninterrupted eligibility for each member’s specific MaineCare services.
**Quality Assurance/Quality Improvement**
Providers must participate in any and all Quality Assurance and Quality Improvement activities initiated by the Department. The Provider must make reasonably available any staff or records necessary for Departmental review for QA/QI activities. The Provider must cooperate in any follow up to such reviews, including, but not limited to, responding and promptly acting upon recommendations made as the result of any Department findings.

**Reportable Events**
Providers shall comply with all terms and conditions of the Department’s Reportable Events policy. The policy can be found at:  
http://www.maine.gov/sos/cec/rules/14/197/197c012.doc

1. The Provider shall provide timely notification to the Department's District office of all Reportable Events in accordance with the provisions of the Department's Reportable Events Policy.
2. All staff must receive training in mandatory reporting/reportable events either before they begin work with clients or, at the latest, within 30 days of beginning work.
3. For Reportable Events that result in a written Adult Protective Investigatory Report, within 30 days of receiving the report, provider must submit a response plan to the District Office for approval which addresses each recommendation contained in the report.
4. Provider will respond to all District Office requests for information or review of services related to Reportable Event(s) and submit a response plan for approval when requested by the District Office.
5. As specified in rule above, the Provider must identify an in-house investigator to complete Adult Protective Investigations as assigned by the APS manager.
6. As specified in rule above, the Provider must submit reportable events electronically.

**Staff Qualifications and Training**
The Provider shall require that all staff receive appropriate orientation and specific training for their position. The Department may specify training requirements for the Provider's staff, and the Provider shall ensure compliance with those requirements.

**Informed Consent Policy**
Providers must have in place and implemented an informed consent policy acceptable to the Department.
**Utilization Review**  
The Provider recognizes the Department’s right to develop and pursue utilization reviews of the Provider’s programs and services, including: requesting actual expenditure data for State funded programs and services; staffing patterns and billings. The Provider agrees to a timely response and prompt action on Department recommendations resulting from such a review.

**Termination of Services by Provider**  
In addition to MaineCare Benefits Manual Chapter I, §1.03-4, the following shall apply:

1. If a provider provides services under this Rider and chooses to voluntarily terminate participation in MaineCare or voluntarily terminates State funded services funded in whole or part by this agreement, the provider must inform the Developmental Services Team Leader in the local DHHS District Office of the intent. This notice should be concurrent with the notice to MaineCare as required in Chapter I. The provider is expected to work cooperatively with the Department on the planning the transition to replacement services for the affected members. In order to facilitate continuity of services for the member(s), the Department reserves the right to require that the provider continue to provide necessary services until appropriate replacement services are secured for the member(s).

2. If a provider chooses to terminate services to a specific member or group of members, the provider must request permission to do so from the Developmental Services Team Leader in the local DHHS District Office. Such a request must be in writing and with a minimum of 30 days advance notice. The written request must state that the provider will agree to work with the member, the Department and any potential replacement provider on the transition of services. In order to facilitate continuity of services for the member(s), the Department reserves the right to request that the provider continue to provide necessary services until appropriate replacement services are secured for the member(s).

3. Providers who terminate services to a member or group of members must provide written notification to the member(s) and legal guardian(s) as appropriate, with copies of all notices to the Developmental Services Team Leader and assigned case manager.

**Termination by Department**  
In addition to MaineCare Benefits Manual Chapter I, §1.03-4 and any other applicable provision, the Department may terminate services of a specific program or service location, without cause, at any time unless otherwise specified in the Provider/Supplier Agreement. This applies to all services funded by this agreement.
**Miscellaneous**

1. The Provider shall report to DHHS licensing as applicable and to the District Office as designated by the DS **Team Leader** all major programming and structural changes in programs funded or licensed by DHHS. Any program changes that add, alter or eliminate existing services to which this Rider applies must be negotiated with the District Office prior to implementation. Major program changes include, but are not limited to, the following: the addition of new services or deletion of existing services; serving a population not served by the agency previously; significant increases or decreases in service capacity; significant changes in the organizational structure; changes in the executive director or name or ownership of the agency; relocation of services.

2. Employees of the Department shall have the right to enter all Provider managed service delivery sites at any time to monitor the services to and records of consumers. For purposes of the sub-section, supported employment sites are not to be considered “provider managed.”

3. The Provider and its staff shall cooperate fully with the Department's employees in providing access to the consumers and their records.

4. The Provider shall cooperate with the Department in a regular review of the condition of any facilities operated by the Provider to ensure safety to consumers and that such facilities meet the requirements of this Agreement.

5. The Provider shall take prompt and appropriate action to remedy any conditions found by the Department to be unsatisfactory or otherwise in need of correction.

6. The Provider shall participate in management level meetings with District Office staff on a schedule established by the District Office.